



Date:

To: Name (of the party on which the request is to be served):		Nationality:	
Address:			
City:	State/Province:	Country:	Postal Code:
Telephone:	Facsimile:	Email:	
Name of Representative: (if known)		Name of Firm: (if applicable)	
Address:			
City:	State/Province:	Country:	Postal Code:
Telephone:	Facsimile:	Email:	
The undersigned party to an agreement contained in a written contract, dated _____ providing for mediation under the International Dispute Resolution Procedures Commercial Arbitration Rules and Mediation Procedures (AAA) Other (please specify): _____ hereby requests mediation.			
Nature of the Dispute: (attach additional sheets, if necessary)			
Type of Business: Filing Party		Responding Party	
Place of Mediation Requested:			
You are hereby notified that copies of our Mediation Agreement and this request are being filed with the International Centre for Dispute Resolution at Case Filing Services, 120 Broadway, Floor 21 - Intake, New York, NY 10271, USA email: casefiling@adr.org , with a request that it commence administration			
Name of Filing Party:		Nationality:	
Address:			
City:	State/Province:	Country:	Postal Code:
Telephone:	Facsimile:	Email:	
Name of Representative: (if known)		Name of Firm: (if applicable)	
Address:			
City:	State/Province:	Country:	Postal Code:
Telephone:	Facsimile:	Email:	
To begin proceedings, please send two copies of this request and the Mediation Agreement, with the filing fee as provided for in the rules, to the ICDR. Send the original request to the responding party.			
Signature: (may be signed by a representative)		Title:	Date:

If you have any questions, please contact the International Centre for Dispute Resolution at 1.888.855.9575 or +1.212.484.4181 or visit our website at www.icdr.org.